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## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0076
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Estimated average burden
hours per response. . . . 4.00

Washington, DC ිරිටි

### TEMPORARY FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ( check if this is an amendment and name has changed, and indicate changed OFFERING OF LLC INTERESTS BORRETT GRAIN FUND LLC	e.)
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section	n 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	1 10000 2010 1010 2010 0110 0110 1011 1011 1011 1011 1011
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  BORRETT GRAIN FUND LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) 190 S. LASALLE STREET, SUITE 3000, CHICAGO, ILLINOIS 60603	Telephone Number (including Area Code) (312) 676-1060
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Trading of commodity futures	
Type of Business Organization    corporation   limited partnership, already formed   other (p	PROCESSEI
	TED LIABILITY COMPANY OCT 0 8 2008
Month Year	UCT V 6 ZUU0
Actual or Estimated Date of Incorporation or Organization: 0 9 0 7 7 Actual Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	
CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 C notice in paper format on or after September 15, 2008 but before March 16, 2009. During that peri initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using comply with all the requirements of § 230.503T.  Federal:  Who Must File: All issuers making an offering of securities in reliance on an exception under Regu seq. or 15 U.S.C. 77d(6).  When To File: A notice must be filed no later than 15 days after the first sale of securities in the offective sand Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address after the date on which it is due, on the date it was mailed by United States registered or ce Where To File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20 Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be remust be a photocopy of the manually signed copy or bear typed or printed signatures.  Information Required: A new filing must contain all information requested. Amendments need only any changes thereto, the information requested in Part C, and any material changes from the information Part E and the Appendix need not be filed with the SEC.  Filing Fee: There is no federal filing fee.  State:  This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate sach state where sales are to be, or have been made. If a state requires the payment of a fee as a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate s Appendix to the notice constitutes a part of this notice and must be completed.	iod, an issuer also may file in paper format an Form D (17 CFR 239.500) and otherwise dation D or Section 4(6), 17 CFR 230.501 et offering. A notice is deemed filed with the U.S. he address given below or, if received at that ritified mail to that address.  2549.  The copy not manually signed report the name of the issuer and offering, mation previously supplied in Parts A and B.  For sales of securities in those states that enotice with the Securities Administrator in precondition to the claim for the exemption, a
Failure to file notice in the appropriate states will not result in a loss of the federal ex appropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ✓ Beneficial Owner General and/or Executive Officer Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) BORRETT, MARK Business or Residence Address (Number and Street, City, State, Zip Code) 190 S. LASALLE STREET, SUITE 3000, CHICAGO, ILLINOIS 60603 General and/or Check Box(es) that Apply: ☐ Promoter Director Managing Partner Full Name (Last name first, if individual) BORRETT MANAGED CAPITAL, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 190 S. LASALLE STREET, SUITE 3000, CHICAGO, ILLINOIS 60603 Check Box(es) that Apply: ☐ Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Director Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Г					B. 11	NFORMATI	ON ABOU	T OFFER	ING				
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes	No ✓	
	Answer also in Appendix, Column 2, if filing under ULOE.												_
2.										s 50,	00.00		
												Yes	No
3.			permit joint									Ø	
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Fui	l Name (l	ast name	first, if indi	ividual)									
Bus	siness or	Residence	Address (N	lumber and	l Street, Ci	ty, State, Z	ip Code)						
Nai	me of Ass	ociated Br	oker or Dea	aler			, ,						
Sta			Listed Has										
	(Check	"All States	or check	individual	States)					•••••		☐ AI	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	Œ
		IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	ИН	NL	NM	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	LWL	WY	PR
Ful	l Name (l	Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Naı	me of Ass	ociated Br	oker or De	aler									-
Sta			Listed Has										
	(Check "All States" or check individual States)									l States			
	AL	AK	AZ.	AR	CA	CO	CT	DE	DC	EL.	GA	HL	ID.
	IL	IN		(KS)	КY	[LA]	ME	MD	MA	ML	MN	MS	MO
	MT	NE	NV	NH	LNI	NM (1777)	NY	NC	ND	ОН	lok.	OR	PA]
	[RL]	SC	(SD)	TN	TX	шт	VΤ	لمعا	WA	لععا	[WI]	LWY)	PR
Ful	l Name (	Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nai	me of Ass	sociated Br	oker or De	aler			<del></del>						
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						· · · · · · · · · · · · · · · · · · ·
	(Check	"All States	s" or check	individual	States)		*************					☐ Al	l States
	ĀL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	Ī
	IL	IN	ĪA.	KS	KY	ĹΑ	ME	MD	MA	ML	MN	MS	МО
	MT	NE	NV	NH	NI	NM Lum	NY	NC VA	ND	OH	OK.	OR	PA
	RI	SC	SD	IN	TX	UT	VT	VA	WA	WV	WI	WY	PR

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	3	s
	Equity		s 250,000
	Common Preferred		
	Convertible Securities (including warrants)		S
	Partnership Interests		
	Other (Specify)		
	Total	·	
	Answer also in Appendix, Column 3, if filing under ULOE.	·	_ •
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$_250,000
	Non-accredited Investors	0	s
	Total (for filings under Rule 504 only)		. s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		<b>s</b>
	Regulation A		\$
	Rule 504		<b>s</b>
	Total		<b>s</b>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		] <b>S</b>
	Printing and Engraving Costs		] <b>S</b> _
	Legal Fees		<b>\$</b>
	Accounting Fees		] \$
	Engineering Fees		] <b>\$</b>
	Sales Commissions (specify finders' fees separately)		
	Other Expenses (identify)	_	s
	Total		, ]

	C. OFFERING PRI	CE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
	and total expenses furnished in response to	regate offering price given in response to Part C — Question of Part C — Question 4.a. This difference is the "adjusted grant C — Question 4.a."	oss	\$
5.	each of the purposes shown. If the amo	ed gross proceed to the issuer used or proposed to be used sount for any purpose is not known, furnish an estimate a life total of the payments listed must equal the adjusted grouse to Part C — Question 4.b above.	ind	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🗆 \$	s
	Purchase of real estate		🗆 \$	
	Purchase, rental or leasing and installat and equipment	ion of machinery	🗆 \$	_ 🗆 \$
	Construction or leasing of plant buildin	gs and facilities	🗀 \$	
	offering that may be used in exchange f	ing the value of securities involved in this for the assets or securities of another		
			_	<del>_</del>
				<del></del>
	Other (specify): TRADING CAPITAL	_	\$ 250,000	
			_ [] \$	. 🗆 \$
	Column Totals		🗆 \$	
	Total Payments Listed (column totals a	dded)	s_2	250,000
		D. FEDERAL SIGNATURE	<del></del>	
sig	nature constitutes an undertaking by the is	gned by the undersigned duly authorized person. If this not suer to furnish to the U.S. Securities and Exchange Comi by non-accredited investor pursuant to paragraph (b)(2) of	mission, upon writte	
	ner (Print or Type) DRRETT GRAIN FUND LLC	Signature May Don Att	Date SEPTEMBER 3	0, 2008
	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Na		MANAGER OF BORRETT MANAGED CAPITAL LLC	MANAGER OF BORD	CTT OD ANI CUND U O

#### **ATTENTION**

				A	PPENDIX			•		
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA										
со										
СТ										
DE										
DC										
FL										
GA			-							
ні										
ID										
IL		<b>_</b>	LLC INTERESTS	2	150,000					
IN	···									
IA							<del></del>			
KS			·							
KY										
LA		<b>_</b>	LLC INTERESTS	1	\$100,000					
ME										
MD										
MA										
MI										
MN			<u> </u>							
MS								-	m(1)	